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UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20531
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Bib Data Sheet

CONFIRMATION NO. 9155

SERIAL NUMBER 09/472,743	FILING DATE 12/27/1999 RULE	CLASS 002	GROUP ART UNIT 3741	ATTORNEY DOCKET NO.
APPLICANTS ROBERT M. FOUS, EUGENE, OR; ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/118,543 02/04/1999 ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/05/2000 ** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Examiner's Signature _____ Initials _____		STATE OR COUNTRY OR	SHEETS DRAWING 2	TOTAL CLAIMS 7
INDEPENDENT CLAIMS 1				
ADDRESS ROBERT M FOUS 2055 W. 25th AVE. EUGENE ,OR 97403				
TITLE ERGONOMIC FIELDING GLOVE				
FILING FEE RECEIVED 380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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APPLICANT

ROBERT M. FOUS, EUGENE, OR.

****CONTINUING DOMESTIC DATA*******
VERIFIED PROVISIONAL APPLICATION NO. 60/118,543 02/04/99
GW

****371 (NAT'L STAGE) DATA*******
VERIFIED
GW None

****FOREIGN APPLICATIONS*******
VERIFIED
GW None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/05/00 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	Met after Allowance <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 2	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
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Verified and Acknowledged GW
Examiner's Initials Initials

ADDRESS

ROBERT M FOUS
2706 MOON MOUNTAIN DRIVE
EUGENE OR 97403

TITLE

ERGONOMIC FIELDING GLOVE

FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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